

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number (if known)

Chapter

11☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **RFA Frontino LLC**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) **82-4812808**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**350 National Blvd., Suite 2B
Long Beach, NY 11561**

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Nassau

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) **www.rfafrontino.com**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: _____

Debtor **RFA Frontino LLC**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **RFA Frontino LLC**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors☐ 1-49☐ 50-99☒ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **RFA Frontino LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **December 23, 2020**
MM / DD / YYYY**X /s/ Anthony Frontino**
Signature of authorized representative of debtor

Title **Vice President****Anthony Frontino**
Printed name**18. Signature of attorney****X /s/ Scott A. Steinberg, Esq.**
Signature of attorney for debtorDate **December 23, 2020**
MM / DD / YYYY**Scott A. Steinberg, Esq. 1838218**
Printed name**Meltzer, Lippe, Goldstein & Breitstone, LLP**
Firm name**190 Willis Avenue**
Mineola, NY 11501
Number, Street, City, State & ZIP CodeContact phone **516-747-0300** Email address **ssteinberg@meltzerlippe.com****1838218 NY**
Bar number and State

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☒ Other document that requires a declaration Matrix Verification

I declare under penalty of perjury that the foregoing is true and correct.

Executed on December 23, 2020**X /s/ Anthony Frontino**

Signature of individual signing on behalf of debtor

Anthony Frontino

Printed name

Vice President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **RFA Frontino LLC**
 United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**
 Case number (if known): _____

☐ Check if this is an
 amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
A Plus Plumbing Corp. 141 Seaview Avenue Staten Island, NY 10304		168 Plymouth Street Plumbing and Sprinkler				\$144,450.00
A&S Steel Contractors Ltd 387 Saw Mill River Road Yonkers, NY 10701		168 Plymouth Street Misc. Metal				\$71,250.00
Aircraft Air Conditioning 237 58th Street Brooklyn, NY 11220		168 Plymouth Street HVAC				\$255,150.00
Arsenal Scaffold Inc. 95 Jersey Street West Babylon, NY 11704		168 Plymouth Street Scaffolding				\$36,000.00
Construction Safety Netwo 998 Old Country Road #401 Plainview, NY 11803		McNulty Vendor				\$34,920.00
Core Mechanical 27622 Commerce Oaks Drive Oak Ridge North, TX 77385		168 Plymouth Street General Expense				\$33,790.00
Empire State Electrical 430 3rd Avenue Brooklyn, NY 11215		168 Plymouth Street Electrical				\$42,930.00
Ennish Construction 147 W. 35th Street New York, NY 10001		168 Plymouth Street Carpentry				\$396,833.00

Debtor **RFA Frontino LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Illuminico 1185 6th Avenue Floor 3 New York, NY 10036		168 Plymouth Street Light Fixtures				\$49,580.00
Jersey Granite & Tile LLC 234 Boundary Road #4 Marlboro, NJ 07746		168 Plymouth Street Stone and Tile				\$92,588.00
Kilroy Architectural 425 Austin Place Bronx, NY 10455		168 Plymouth Street Factory Style Windows				\$61,646.00
KNS Building Restoration 59-29 55th Street Flushing, NY 11378		168 Plymouth Street Roofing				\$100,148.00
L.I.F. Security 5 Harbor Park Drive Port Washington, NY 11050						\$30,761.00
Maspeth Welding Inc. 59-30 54th Street Maspeth, NY 11378						\$61,662.00
Mode Unlimited 1133 McDonald Avenue Brooklyn, NY 11230		168 Plymouth Street Curtain Wall				\$101,816.00
Pasenti Concrete 1407 Kings Highway #219 Sugar Loaf, NY 10981						\$48,131.00
Priority NY Inc 1428 Midland Avenue Suite 2 & 3 Bronxville, NY 10708		142 Watts Street Carpentry				\$49,950.00
Rock Group 53-28 11th Street Long Island City, NY 11101		168 Plymouth Street Scaffolding	Contingent			\$124,774.00
Roof Services 48 West Jefryn Boulevard Deer Park, NY 11729		142 Watts Street Roofing				\$29,887.00
Select Interiors 580 5th Avenue New York, NY 10036						\$31,504.00

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **5,454,152.41****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **5,454,152.41****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **353,000.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **2,155,159.00****4. Total liabilities**
Lines 2 + 3a + 3b\$ **2,508,159.00**

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. JPMorgan Chase Bank, N.A.Checking Account8807\$1,485,501.003.2. JPMorgan Chase Bank, N.A.Subholding Account3071\$868,873.003.3. JPMorgan Chase Bank, N.A.Payroll Account8815\$1,703.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$2,356,077.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

Debtor **RFA Frontino LLC**
Name

Case number (If known) _____

8.1. **General Liability Insurance****\$38,496.00**9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$38,496.00**Part 3: Accounts receivable**10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less:	<u>297,217.88</u>	-	<u>0.00</u>	=	<u>\$297,217.88</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>74,942.54</u>	-	<u>0.00</u>	=	<u>\$74,942.54</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>296,806.39</u>	-	<u>0.00</u>	=	<u>\$296,806.39</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>2,350,987.03</u>	-	<u>0.00</u>	=	<u>\$2,350,987.03</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>26,368.07</u>	-	<u>0.00</u>	=....	<u>\$26,368.07</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>2,257.50</u>	-	<u>0.00</u>	=....	<u>\$2,257.50</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$3,048,579.41**Part 4: Investments**13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

Debtor **RFA Frontino LLC**
Name

Case number (If known)

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
- ☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Six (6) Surface Laptops	\$0.00		\$2,500.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$2,500.00**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			

Debtor **RFA Frontino LLC** Case number (If known) _____

Name

Sidewalk barriers **\$0.00** **\$6,000.00****Assorted Tools** **\$0.00** **\$2,500.00**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$8,500.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes Fill in the information below.**General description****Net book value of
debtor's interest**
(Where available)**Valuation method used
for current value****Current value of
debtor's interest**60. **Patents, copyrights, trademarks, and trade secrets**61. **Internet domain names and websites****Website: www.rfafrontino.com****\$0.00****Unknown**62. **Licenses, franchises, and royalties**63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.0067. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)**☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

Debtor **RFA Frontino LLC**
Name

Case number (If known) _____

- ☒ No
☐ Yes

Part 11: **All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **RFA Frontino LLC**
Name

Case number (If known)

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$2,356,077.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$38,496.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$3,048,579.41	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$2,500.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$8,500.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$5,454,152.41	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$5,454,152.41

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	JPMorgan Chase Bank <small>Creditor's Name</small> 82 Seventh Street Garden City, NY 11530 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 9002 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Line of Credit Describe the lien Accounts, Accounts receivable Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$203,000.00	\$203,000.00

2.2	SBA <small>Creditor's Name</small> 26 Federal Plaza #1300 New York, NY 10278 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 8108 Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien EIDL Loan Describe the lien Accounts, Accounts receivable Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$150,000.00	\$150,000.00
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Debtor **RFA Frontino LLC**

Name

Case number (if known)

☒ No☐ Contingent☐ Yes. Specify each creditor,
including this creditor and its relative
priority.☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$353,000.00**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?Last 4 digits of
account number for
this entity

Fill in this information to identify the case:Debtor name **RFA Frontino LLC**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address IRS 290 Broadway New York, NY 10007 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Tax Liability - Payroll Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown Unknown

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address 1-800 Mr. Rubbish 1033 86th Street Brooklyn, NY 11228 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: 168 Plymouth Street Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address A Plus Plumbing Corp. 141 Seaview Avenue Staten Island, NY 10304 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: 168 Plymouth Street Plumbing and Sprinker Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	RFA Frontino LLC <small>Name</small>	Case number (if known) _____
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3.3	Nonpriority creditor's name and mailing address A Plus Plumbing Corp. 141 Seaview Avenue Staten Island, NY 10304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Sprinkler</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,537.00
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3.4	Nonpriority creditor's name and mailing address A&S Steel Contractors Ltd 387 Saw Mill River Road Yonkers, NY 10701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Misc. Metal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$71,250.00
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3.5	Nonpriority creditor's name and mailing address Able Fire Prevention Corp 241 West 26th Street 2nd Floor New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$817.00
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3.6	Nonpriority creditor's name and mailing address Able Fire Prevention Corp 241 West 26th Street 2nd Floor New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.7	Nonpriority creditor's name and mailing address Able Fire Prevention Corp 241 West 26th Street 2nd Floor New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$216.00
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3.8	Nonpriority creditor's name and mailing address ACON Construction Inc 28-90 Review Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Foundations and Concrete</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,944.00
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Debtor RFA Frontino LLC		Case number (if known) _____	
Name			
3.9	Nonpriority creditor's name and mailing address ACON Construction Inc 28-90 Review Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Masonry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.10	Nonpriority creditor's name and mailing address Adler Windows 350 7th Avenue #1103 New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Double Hung Windows</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.11	Nonpriority creditor's name and mailing address ADP 40 West 25th Street New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>General Expenses</u> <u>Payroll Processing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.12	Nonpriority creditor's name and mailing address AFS / IBEX 750 N Saint Paul St. Suite 1500 Dallas, TX 75201-3210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.13	Nonpriority creditor's name and mailing address Air Exchange and Energy 169 Oakdene Avenue Leonia, NJ 07605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>1270 Avenue of the Americas</u> <u>HVAC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.14	Nonpriority creditor's name and mailing address Aircraft Air Conditioning 237 58th Street Brooklyn, NY 11220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>HVAC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255,150.00
3.15	Nonpriority creditor's name and mailing address Aircraft Air Conditioning 237 58th Street Brooklyn, NY 11220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>HVAC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor RFA Frontino LLC Name _____	Case number (if known) _____
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3.16	Nonpriority creditor's name and mailing address American Elite Constructi 120 Lave Avenue South Suite 21 Nesconset, NY 11767 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Fireproofing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,302.00</u>
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3.17	Nonpriority creditor's name and mailing address American Elite Constructi 120 Lave Avenue South Suite 21 Nesconset, NY 11767 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Fireproofing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,219.00</u>
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3.18	Nonpriority creditor's name and mailing address American Express WFC 200 Vesey Street New York, NY 10285 Date(s) debt was incurred ____ Last 4 digits of account number <u>2007</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>General Expenses</u> <u>Credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,727.00</u>
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3.19	Nonpriority creditor's name and mailing address American Spray-On Corp 5 Hanover Square New York, NY 10004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Fireproofing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.20	Nonpriority creditor's name and mailing address Ameriscan GPR 12-11 38th Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.21	Nonpriority creditor's name and mailing address Architectual Iron Company 104 Ironwood Court Milford, PA 18337 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Cresting</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	RFA Frontino LLC Name _____	Case number (if known) _____
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3.22	Nonpriority creditor's name and mailing address Arsenal Scaffold Inc. 95 Jersey Street West Babylon, NY 11704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Scaffolding</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,000.00
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3.23	Nonpriority creditor's name and mailing address Arsenal Scaffold Inc. 95 Jersey Street West Babylon, NY 11704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Scaffolding</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.24	Nonpriority creditor's name and mailing address Atlas Acon Electric 283 Hudson Street New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>1270 Avenue of the Americas Electrical</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.25	Nonpriority creditor's name and mailing address AXOS Designs Inc 2635 1st Street Astoria, NY 11102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Axos</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
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3.26	Nonpriority creditor's name and mailing address BAB Communications Inc. 2211 Ocean Avenue Brooklyn, NY 11229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Security and Communications</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,563.00
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3.27	Nonpriority creditor's name and mailing address Belvedere Fireplace & Chi 195-N Central Avenue East Farmingdale, NY 11735 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Fireplaces</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	RFA Frontino LLC Name _____	Case number (if known) _____
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3.28	Nonpriority creditor's name and mailing address Big Apple Window Cleaning P.O. Box 2752 New York, NY 10163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.29	Nonpriority creditor's name and mailing address Brooklyn Fiber 68 34th Street Suite B524 Brooklyn, NY 11232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.30	Nonpriority creditor's name and mailing address CallAHead Corp. 304 Cross Bay Boulevard Broad Channel, NY 11693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,836.00
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3.31	Nonpriority creditor's name and mailing address CallAHead Corp. 304 Cross Bay Boulevard Broad Channel, NY 11693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$332.00
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3.32	Nonpriority creditor's name and mailing address CallAHead Corp. 304 Cross Bay Boulevard Broad Channel, NY 11693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.33	Nonpriority creditor's name and mailing address Carlos Augusto 2254 Cedar Avenue Apt 3C Bronx, NY 10468 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Personal Injury Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.34	Nonpriority creditor's name and mailing address Castellano Korenberg & Co 313 West Old Country Road Hicksville, NY 11801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$775.00
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Debtor	RFA Frontino LLC Name	Case number (if known)
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3.35	Nonpriority creditor's name and mailing address Celtic Building Supplies 68 Torre Place Yonkers, NY 10703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,952.00</u>
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3.36	Nonpriority creditor's name and mailing address Celtic Building Supplies 68 Torre Place Yonkers, NY 10703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vender</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,042.00</u>
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3.37	Nonpriority creditor's name and mailing address Celtic Building Supplies 68 Torre Place Yonkers, NY 10703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$380.00</u>
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3.38	Nonpriority creditor's name and mailing address Certified Lumber 470 Kent Avenue Brooklyn, NY 11249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.39	Nonpriority creditor's name and mailing address Certified Lumber 470 Kent Avenue Brooklyn, NY 11249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.40	Nonpriority creditor's name and mailing address Cesar NYC Kitchens 50 West 23rd Street New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Kitchens</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.41	Nonpriority creditor's name and mailing address Chase Visa 1 Chase Manhattan Plaza New York, NY 10005 Date(s) debt was incurred ____ Last 4 digits of account number <u>8802</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,600.00</u>
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Debtor	RFA Frontino LLC Name	Case number (if known)
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3.42	Nonpriority creditor's name and mailing address Checker Glass Corporation 5 Commerical Avenue Garden City, NY 11530 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Interior Glazing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.43	Nonpriority creditor's name and mailing address Checker Glass Corporation 5 Commerical Avenue Garden City, NY 11530 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Interior Glazing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$513.00
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3.44	Nonpriority creditor's name and mailing address Chutes Enterprise 774 Manor Road Staten Island, NY 10314 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Trash Chute</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000.00
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3.45	Nonpriority creditor's name and mailing address Cintas First Aid and Safe 75A Bloomingdale Road Hicksville, NY 11801 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.46	Nonpriority creditor's name and mailing address Cintas First Aid and Safe 75A Bloomingdale Road Hicksville, NY 11801 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$517.00
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3.47	Nonpriority creditor's name and mailing address Cintas First Aid and Safe 75A Bloomingdale Road Hicksville, NY 11801 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	RFA Frontino LLC <small>Name</small>	Case number (if known) _____
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3.48	Nonpriority creditor's name and mailing address Colony Hardware 1049 Zerega Avenue Bronx, NY 10462 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.49	Nonpriority creditor's name and mailing address Complete Document Solutio 90 Broad Street #2200 New York, NY 10004 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Monthly Copies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49.00
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3.50	Nonpriority creditor's name and mailing address Construction Safety Netwo 998 Old Country Road #401 Plainview, NY 11803 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.51	Nonpriority creditor's name and mailing address Construction Safety Netwo 998 Old Country Road #401 Plainview, NY 11803 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,920.00
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3.52	Nonpriority creditor's name and mailing address Contractors Line and Grad 23 Nepperhan Avenue Elmsford, NY 10523 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.53	Nonpriority creditor's name and mailing address Core Mechanical 27622 Commerce Oaks Drive Oak Ridge North, TX 77385 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street General Expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,790.00
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3.54	Nonpriority creditor's name and mailing address Creative Floor Solutions 380 Larch Avenue Bogota, NJ 07603 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Wood Flooring</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,000.00
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Debtor	RFA Frontino LLC Name	Case number (if known)
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3.55 Nonpriority creditor's name and mailing address

Cusack Custom Wood Floori
177 Whippoorwill Road
Yorktown Heights, NY 10598

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

\$13,875.00

3.56 Nonpriority creditor's name and mailing address

DeLage Landen Financial
111 Old Eagle School Road
Wayne, PA 19087

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☒ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Printer Lease

Is the claim subject to offset? ☒ No ☐ Yes

\$7,173.00

3.57 Nonpriority creditor's name and mailing address

Digitech Printers
150 West 30th Street
#2
New York, NY 10001

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: 168 Plymouth Street
Vendor

Is the claim subject to offset? ☒ No ☐ Yes

Unknown

3.58 Nonpriority creditor's name and mailing address

Digitech Printers
150 West 30th Street
#2
New York, NY 10001

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: 142 Watts Street
Vendor

Is the claim subject to offset? ☒ No ☐ Yes

Unknown

3.59 Nonpriority creditor's name and mailing address

Digitech Printers
150 West 30th Street
#2
New York, NY 10001

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: McNulty
Vendor

Is the claim subject to offset? ☒ No ☐ Yes

Unknown

3.60 Nonpriority creditor's name and mailing address

Empire State Electrical
430 3rd Avenue
Brooklyn, NY 11215

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: 168 Plymouth Street
Electrical

Is the claim subject to offset? ☒ No ☐ Yes

\$42,930.00

3.61 Nonpriority creditor's name and mailing address

Empire State Electrical
430 3rd Avenue
Brooklyn, NY 11215

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: 142 Watts Street
Electrical

Is the claim subject to offset? ☒ No ☐ Yes

\$17,122.00

Debtor	RFA Frontino LLC		Case number (if known)
	Name		
3.62	Nonpriority creditor's name and mailing address Empire State Electrical 430 3rd Avenue Brooklyn, NY 11215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Fire Alarm & ACRS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.63	Nonpriority creditor's name and mailing address Ennish Construction 147 W. 35th Street New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Wood Framing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.64	Nonpriority creditor's name and mailing address Ennish Construction 147 W. 35th Street New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Carpentry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$396,833.00
3.65	Nonpriority creditor's name and mailing address Enobrac Plumbing Inc 508 Morgan Avenue Brooklyn, NY 11222 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Plumbing and Sprinkler</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,150.00
3.66	Nonpriority creditor's name and mailing address Feldman Lumber 1281 Metropolitan Avenue Brooklyn, NY 11237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.67	Nonpriority creditor's name and mailing address Feldman Lumber 1281 Metropolitan Avenue Brooklyn, NY 11237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor RFA Frontino LLC Name		Case number (if known)	
3.68	Nonpriority creditor's name and mailing address Feldman Lumber 1281 Metropolitan Avenue Brooklyn, NY 11237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.69	Nonpriority creditor's name and mailing address Fidel Luiz Pastrana c/o Restivo & Murphy LLP 401 Franklin Avenue Suite 107 Garden City, NY 11530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Personal Injury Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.70	Nonpriority creditor's name and mailing address G-Tech Elevator 12 Sherman Street Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Conveying Equipment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,478.00
3.71	Nonpriority creditor's name and mailing address Geoffrey A Lagas & Associ 45 Rockefeller Plaza New York, NY 10111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.72	Nonpriority creditor's name and mailing address Geoland 1317 Park Avenue New Hyde Park, NY 11040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.73	Nonpriority creditor's name and mailing address Geoland 1317 Park Avenue New Hyde Park, NY 11040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.74	Nonpriority creditor's name and mailing address GMC Contracting 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Demolition</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	RFA Frontino LLC <small>Name</small>	Case number (if known) _____
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3.75	Nonpriority creditor's name and mailing address GMC Contracting 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Demotion</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.76	Nonpriority creditor's name and mailing address GMC Contracting 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Demolition</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.77	Nonpriority creditor's name and mailing address GMC Contracting 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>1270 Avenue of the Americas Demolition</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.78	Nonpriority creditor's name and mailing address Gotham General Carpentry 933 Bruckner Boulevard Bronx, NY 10459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Wood Framing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.79	Nonpriority creditor's name and mailing address Gotham General Carpentry 933 Bruckner Boulevard Bronx, NY 10459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Carpentry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,120.00
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3.80	Nonpriority creditor's name and mailing address Gotham General Carpentry 933 Bruckner Boulevard Bronx, NY 10459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>1270 Avenue of the Americas Drywall</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	RFA Frontino LLC <small>Name</small>	Case number (if known) _____
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3.81	Nonpriority creditor's name and mailing address Grato Parquet 104 Reade Street New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Wood Flooring</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.82	Nonpriority creditor's name and mailing address Hamilton Metalcraft 59 New York Avenue Westbury, NY 11590 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Railings, Balacony, and Bulk Steel</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,365.00
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3.83	Nonpriority creditor's name and mailing address Henry Restoration 120 Lake Avenue South Suite 14 Nesconset, NY 11767 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Exterior Masonry</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,992.00
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3.84	Nonpriority creditor's name and mailing address High Rise Fire Protection 144 21st Street Brooklyn, NY 11232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Fire Alarm & ARCS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.85	Nonpriority creditor's name and mailing address Illuminico 1185 6th Avenue Floor 3 New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Light Fixtures</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,580.00
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3.86	Nonpriority creditor's name and mailing address Infinity Painting Inc. 1978 Richmond Terrace Suite 5 Staten Island, NY 10302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Interior Brick Painting</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	RFA Frontino LLC	
3.87	Nonpriority creditor's name and mailing address Infinity Painting Inc. 1978 Richmond Terrace Suite 5 Staten Island, NY 10302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Painting</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.88	Nonpriority creditor's name and mailing address Jersey Granite & Tile LLC 234 Boundary Road #4 Marlboro, NJ 07746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Stone and Tile</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$92,588.00
3.89	Nonpriority creditor's name and mailing address JLM 11 John Street New York, NY 10038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$8,980.00
3.90	Nonpriority creditor's name and mailing address JP McHale Pest 241 Bleakley Avenue Buchanan, NY 10511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$327.00
3.91	Nonpriority creditor's name and mailing address JP McHale Pest 241 Bleakley Avenue Buchanan, NY 10511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.92	Nonpriority creditor's name and mailing address Kilroy Architectural 425 Austin Place Bronx, NY 10455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Factory Style Windows</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$61,646.00
3.93	Nonpriority creditor's name and mailing address KM Associates of NY Inc 158 West 29th Street 7th Floor New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown

Debtor	RFA Frontino LLC Name _____	Case number (if known) _____
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3.94	Nonpriority creditor's name and mailing address KM Associates of NY Inc 158 West 29th Street 7th Floor New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,826.00
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3.95	Nonpriority creditor's name and mailing address KM Associates of NY Inc 158 West 29th Street 7th Floor New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.96	Nonpriority creditor's name and mailing address KNS Building Restoration 59-29 55th Street Flushing, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Aluminum Facade Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.97	Nonpriority creditor's name and mailing address KNS Building Restoration 59-29 55th Street Flushing, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Roofing Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,148.00
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3.98	Nonpriority creditor's name and mailing address L. Martone & Sons Inc 166 Sea Cliff Avenue Glen Cove, NY 11542 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.99	Nonpriority creditor's name and mailing address L.I.F. Security 5 Harbor Park Drive Port Washington, NY 11050 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,761.00
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3.100	Nonpriority creditor's name and mailing address Lake Landscape and Mason 339 Ronkonkoma Avenue Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	RFA Frontino LLC Name _____	Case number (if known) _____
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3.101	Nonpriority creditor's name and mailing address Lake Landscape and Mason 339 Ronkonkoma Avenue Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.102	Nonpriority creditor's name and mailing address LCD Elevator Repair Inc 690 Broadway Massapequa, NY 11758 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.103	Nonpriority creditor's name and mailing address LCD Elevator Repair Inc 690 Broadway Massapequa, NY 11758 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.104	Nonpriority creditor's name and mailing address Lion Electric Inc 205 Route 46 West Suite 7B Totowa, NJ 07512 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.105	Nonpriority creditor's name and mailing address LL Overhead Garage Doors 31-25 45th Street Astoria, NY 11103 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Garage Door</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.106	Nonpriority creditor's name and mailing address Loading Dock, Inc. 20 Meta Lane Lodi, NJ 07644 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Sliding Metal Door</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107	Nonpriority creditor's name and mailing address Maspeth Welding 59-30 54th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Structural Steel</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor RFA Frontino LLC Name _____	Case number (if known) _____
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3.108	Nonpriority creditor's name and mailing address Maspeth Welding Inc. 59-30 54th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,000.00</u>
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3.109	Nonpriority creditor's name and mailing address Maspeth Welding Inc. 59-30 54th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$61,662.00</u>
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3.110	Nonpriority creditor's name and mailing address Maspeth Welding Inc. 59-30 54th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.111	Nonpriority creditor's name and mailing address Medley Air Inc. 265 McCormick Drive Bohemia, NY 11716 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>HVAC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,840.00</u>
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3.112	Nonpriority creditor's name and mailing address Mercon Contracting Inc 1616 Mermaid Avenue Brooklyn, NY 11224 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,011.00</u>
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3.113	Nonpriority creditor's name and mailing address Metropolis Group Inc 22 Cortlandt Street #10 New York, NY 10007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.114	Nonpriority creditor's name and mailing address Metropolitan Lumber & Har 617 11th Avenue New York, NY 10036 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	Name	Case number (if known)
Debtor	RFA Frontino LLC	
3.115	Nonpriority creditor's name and mailing address Metropolitan Lumber & Har 617 11th Avenue New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.116	Nonpriority creditor's name and mailing address Michael Prophete c/o The Hamel Law Firm 11 E. 44th Street Suite 1201 New York, NY 10017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Personal Injury Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.117	Nonpriority creditor's name and mailing address Mode Unlimited 1133 McDonald Avenue Brooklyn, NY 11230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Curtain Wall</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$101,816.00
3.118	Nonpriority creditor's name and mailing address Mode Unlimited 1133 McDonald Avenue Brooklyn, NY 11230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Fiber C</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$21,600.00
3.119	Nonpriority creditor's name and mailing address Nithun Construction Compa 475 McDonald Avenue Suite 300A Brooklyn, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$21,176.00
3.120	Nonpriority creditor's name and mailing address NYC DOB 280 Broadway New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Building Violations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.121	Nonpriority creditor's name and mailing address NYC DOB 280 Broadway New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Building Violations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown

Debtor	Name	Case number (if known)
Debtor	RFA Frontino LLC	
3.122	Nonpriority creditor's name and mailing address NYC DOB 280 Broadway New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>McNulty Building Violations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.123	Nonpriority creditor's name and mailing address NYC DOT 55 Water Street New York, NY 10041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.124	Nonpriority creditor's name and mailing address NYC DOT 55 Water Street New York, NY 10041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.125	Nonpriority creditor's name and mailing address Oxford United Health 136-02 Roosevelt Avenue Flushing, NY 11354 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Health Insurance Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$19,013.00
3.126	Nonpriority creditor's name and mailing address Pasenti Concrete 1407 Kings Highway #219 Sugar Loaf, NY 10981 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$48,131.00
3.127	Nonpriority creditor's name and mailing address Pasenti Concrete 1407 Kings Highway #219 Sugar Loaf, NY 10981 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.128	Nonpriority creditor's name and mailing address Patriot Sawcutting Inc 103 South Van Brunt Stree Englewood, NJ 07631 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$5,720.00

Debtor	RFA Frontino LLC		Case number (if known)
	Name		
3.129	Nonpriority creditor's name and mailing address Patriot Sawcutting Inc 103 South Van Brunt Stree Englewood, NJ 07631 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,402.00
3.130	Nonpriority creditor's name and mailing address Pella Windows & Doors 345 Walsh Drive Parsippany, NJ 07054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.131	Nonpriority creditor's name and mailing address Pillinger Miller Tarallo 17 State Street F7 New York, NY 10004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.132	Nonpriority creditor's name and mailing address Plan B Engineering LLC 475 Veit Road Huntingdon Valley, PA 19006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.133	Nonpriority creditor's name and mailing address Priority NY Inc 1428 Midland Avenue Suite 2 & 3 Bronxville, NY 10708 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> Carpentry Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,950.00
3.134	Nonpriority creditor's name and mailing address Prudential Financial 1270 6th Avenue New York, NY 10020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.135	Nonpriority creditor's name and mailing address PS Industries Incorporate 1150 48th Street South Grand Forks, ND 58201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,625.00

Debtor	Name	Case number (if known)
	RFA Frontino LLC	
3.136	Nonpriority creditor's name and mailing address Queens County Carting Inc 35-12 19th Avenue Suite 3W Astoria, NY 11105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.137	Nonpriority creditor's name and mailing address Queens County Carting Inc 35-12 19th Avenue Suite 3W Astoria, NY 11105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.138	Nonpriority creditor's name and mailing address Queens County Carting Inc 35-12 19th Avenue Suite 3W Astoria, NY 11105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.139	Nonpriority creditor's name and mailing address ReadyRefresh P.O. Box 856192 Louisville, KY 40285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.140	Nonpriority creditor's name and mailing address Regulator Construction Co 41 Torre Place Yonkers, NY 10703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$24,500.00
3.141	Nonpriority creditor's name and mailing address ReqPay Inc 287 Park Avenue South Suite 430 New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.142	Nonpriority creditor's name and mailing address Rizzo Associates Inc 97 East Hawthorne Avenue Valley Stream, NY 11580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor RFA Frontino LLC Name		Case number (if known)	
3.143	Nonpriority creditor's name and mailing address RJS Pest 286 Madison Avenue #502 New York, NY 10017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.144	Nonpriority creditor's name and mailing address RJS Pest 286 Madison Avenue #502 New York, NY 10017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.145	Nonpriority creditor's name and mailing address Rock Group 53-28 11th Street Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Scaffolding Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$124,774.00
3.146	Nonpriority creditor's name and mailing address Rock Group 53-28 11th Street Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> Scaffolding Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.147	Nonpriority creditor's name and mailing address Roof Services 48 West Jefryn Boulevard Deer Park, NY 11729 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.148	Nonpriority creditor's name and mailing address Roof Services 48 West Jefryn Boulevard Deer Park, NY 11729 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> Roofing Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,887.00
3.149	Nonpriority creditor's name and mailing address RPO Inc 146 West 29th Street New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	RFA Frontino LLC Name _____	Case number (if known) _____
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3.150	Nonpriority creditor's name and mailing address Saltus LLC 139 Fulton St #804 New York, NY 10038 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$825.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.151	Nonpriority creditor's name and mailing address Select Interiors 580 5th Avenue New York, NY 10036 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$31,504.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.152	Nonpriority creditor's name and mailing address Signature Cleaning Srvcs 231 West 29th Street New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>General Expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153	Nonpriority creditor's name and mailing address Site Safety LLC 29 West 38th Street 12th Floor New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>General Expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154	Nonpriority creditor's name and mailing address Site Safety LLC 29 West 38th Street 12th Floor New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155	Nonpriority creditor's name and mailing address Site Safety LLC 29 West 38th Street 12th Floor New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.156	Nonpriority creditor's name and mailing address Spring Scaffolding 49-30 31st Place Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty</u> <u>Scaffolding</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	RFA Frontino LLC		Case number (if known)
	Name		
3.157	Nonpriority creditor's name and mailing address Star Dash Mechanical 71 McArthur Avenue Staten Island, NY 10312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.158	Nonpriority creditor's name and mailing address Stone Source 215 Park Avenue South New York, NY 10003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>142 Watts Street</u> <u>Stone and Tile</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,311.00
3.159	Nonpriority creditor's name and mailing address The Marin Organization 998 Old Country Road #401 Plainview, NY 11803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.160	Nonpriority creditor's name and mailing address The Marin Organization 998 Old Country Road #401 Plainview, NY 11803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.161	Nonpriority creditor's name and mailing address The Marin Organization 998 Old Country Road #401 Plainview, NY 11803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.162	Nonpriority creditor's name and mailing address Trinity Highway Products 1170 North State Street Girard, OH 44420 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.163	Nonpriority creditor's name and mailing address TSC Training Academy 36-06 43rd Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	RFA Frontino LLC <small>Name</small>	Case number (if known) _____
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3.164	Nonpriority creditor's name and mailing address UnoClean 150 Arrowhead Drive Hampshire, IL 60140 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>168 Plymouth Street Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.165	Nonpriority creditor's name and mailing address UnoClean 150 Arrowhead Drive Hampshire, IL 60140 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>McNulty Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166	Nonpriority creditor's name and mailing address Verizon 299 Broadway New York, NY 10007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$897.00
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3.167	Nonpriority creditor's name and mailing address Vespa Stone 241 West 30th Street New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>140 Broadway Subcontractor Expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00
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3.168	Nonpriority creditor's name and mailing address Vonage NYC 140 Broadway New York, NY 10006 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.169	Nonpriority creditor's name and mailing address Yenni Placencia DeJesus c/o Gorayeb & Associates 100 William Street Suite 1900 New York, NY 10038 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Personal Injury Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.170	Nonpriority creditor's name and mailing address Zetlin & DeChiara LLP 801 2nd Avenue 16th Floor New York, NY 10017 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor RFA Frontino LLC	Case number (if known) _____
Name _____	

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.171</div> Nonpriority creditor's name and mailing address Zetlin & DeChiara LLP 801 2nd Avenue 16th Floor New York, NY 10017 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-left: 20px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
--	---	----------------

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 2,155,159.00
5c.	\$ 2,155,159.00

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Construction Contract - Debtor is General Contractor**

State the term remaining

List the contract number of any government contract _____

**142 Watts, LLC
1465 East Putnam Avenue
Unit 320
Old Greenwich, CT 06870**2.2. State what the contract or lease is for and the nature of the debtor's interest **Construction Contract - Debtor is General Contractor**

State the term remaining

List the contract number of any government contract _____

**168 Plymouth LLC
20 Jay Street
#1003
Brooklyn, NY 11201**2.3. State what the contract or lease is for and the nature of the debtor's interest **Construction Contract - Debtor is General Contractor**

State the term remaining

List the contract number of any government contract _____

**Clinton Housing
403 West 40th Street
New York, NY 10018**2.4. State what the contract or lease is for and the nature of the debtor's interest **Printer/Copier**

State the term remaining

5 Years

List the contract number of any government contract _____

**DeLage Landen Financial
111 Old Eagle School Road
Wayne, PA 19087**

Debtor 1 **RFA Frontino LLC**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest

Construction Contract - Debtor is General Contractor

State the term remaining

List the contract number of any government contract

**Tishman Speyer Properties
45 Rockefeller Plaza
New York, NY 10111**

Fill in this information to identify the case:Debtor name RFA Frontino LLCUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Anthony Frontino** **2524 Westlake Avenue
Oceanside, NY 11572**

JPMorgan Chase Bank

☒ D 2.1
☐ E/F _____
☐ G _____

2.2 **RFA Hudson Inc.** **350 National Blvd.
Suite 2B
Long Beach, NY 11561**

JPMorgan Chase Bank

☒ D 2.1
☐ E/F _____
☐ G _____

2.3 **Richard Aguggia** **67 Kirkwood Street
Long Beach, NY 11561**

JPMorgan Chase Bank

☒ D 2.1
☐ E/F _____
☐ G _____

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Eastern District of New York

In re **RFA Frontino LLC**

Debtor(s)

Case No.

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	25,000.00
Prior to the filing of this statement I have received	\$	25,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 23, 2020

Date

/s/ Scott A. Steinberg, Esq.

Scott A. Steinberg, Esq. 1838218

Signature of Attorney

Meltzer, Lippe, Goldstein & Breitstone, LLP

190 Willis Avenue

Mineola, NY 11501

516-747-0300 Fax: 516-747-0653

ssteinberg@meltzerlippe.com

Name of law firm

**United States Bankruptcy Court
Eastern District of New York**

In re **RFA Frontino LLC**

Debtor(s)

Case No.
Chapter**11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Anthony Frontino 2524 Westlake Avenue Oceanside, NY 11572		50%	Membership
Richard Aguggia 67 Kirkwood Street Long Beach, NY 11561		50%	Membership

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Vice President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **December 23, 2020**Signature **/s/ Anthony Frontino
Anthony Frontino**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Eastern District of New York**

In re **RFA Frontino LLC**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: **December 23, 2020****/s/ Anthony Frontino****Anthony Frontino/Vice President**

Signer/Title

Date: **December 23, 2020****/s/ Scott A. Steinberg, Esq.**

Signature of Attorney

Scott A. Steinberg, Esq. 1838218**Meltzer, Lippe, Goldstein & Breitstone, LLP****190 Willis Avenue****Mineola, NY 11501****516-747-0300 Fax: 516-747-0653**

1-800 Mr. Rubbish
1033 86th Street
Brooklyn, NY 11228

142 Watts, LLC
1465 East Putnam Avenue
Unit 320
Old Greenwich, CT 06870

168 Plymouth LLC
20 Jay Street
#1003
Brooklyn, NY 11201

A Plus Plumbing Corp.
141 Seaview Avenue
Staten Island, NY 10304

A&S Steel Contractors Ltd
387 Saw Mill River Road
Yonkers, NY 10701

Able Fire Prevention Corp
241 West 26th Street
2nd Floor
New York, NY 10001

ACON Construction Inc
28-90 Review Avenue
Long Island City, NY 11101

Adler Windows
350 7th Avenue
#1103
New York, NY 10001

ADP
40 West 25th Street
New York, NY 10010

AFS / IBEX
750 N Saint Paul St.
Suite 1500
Dallas, TX 75201-3210

Air Exchange and Energy
169 Oakdene Avenue
Leonida, NJ 07605

Aircraft Air Conditioning
237 58th Street
Brooklyn, NY 11220

American Elite Constructi
120 Lave Avenue South
Suite 21
Nesconset, NY 11767

American Express
WFC
200 Vesey Street
New York, NY 10285

American Spray-On Corp
5 Hanover Square
New York, NY 10004

Ameriscan GPR
12-11 38th Avenue
Long Island City, NY 11101

Anthony Frontino
2524 Westlake Avenue
Oceanside, NY 11572

Architectural Iron Company
104 Ironwood Court
Milford, PA 18337

Arsenal Scaffold Inc.
95 Jersey Street
West Babylon, NY 11704

Atlas Acon Electric
283 Hudson Street
New York, NY 10013

AXOS Designs Inc
2635 1st Street
Astoria, NY 11102

BAB Communications Inc.
2211 Ocean Avenue
Brooklyn, NY 11229

Belvedere Fireplace & Chi
195-N Central Avenue East
Farmingdale, NY 11735

Big Apple Window Cleaning
P.O. Box 2752
New York, NY 10163

Brooklyn Fiber
68 34th Street
Suite B524
Brooklyn, NY 11232

CallAHead Corp.
304 Cross Bay Boulevard
Broad Channel, NY 11693

Carlos Augusto
2254 Cedar Avenue
Apt 3C
Bronx, NY 10468

Castellano Korenberg & Co
313 West Old Country Road
Hicksville, NY 11801

Celtic Building Supplies
68 Torre Place
Yonkers, NY 10703

Certified Lumber
470 Kent Avenue
Brooklyn, NY 11249

Cesar NYC Kitchens
50 West 23rd Street
New York, NY 10010

Chase Visa
1 Chase Manhattan Plaza
New York, NY 10005

Checker Glass Corporation
5 Commerical Avenue
Garden City, NY 11530

Chutes Enterprise
774 Manor Road
Staten Island, NY 10314

Cintas First Aid and Safe
75A Bloomingdale Road
Hicksville, NY 11801

Clinton Housing
403 West 40th Street
New York, NY 10018

Colony Hardware
1049 Zerega Avenue
Bronx, NY 10462

Complete Document Solutio
90 Broad Street
#2200
New York, NY 10004

Construction Safety Netwo
998 Old Country Road
#401
Plainview, NY 11803

Contractors Line and Grad
23 Nepperhan Avenue
Elmsford, NY 10523

Core Mechanical
27622 Commerce Oaks Drive
Oak Ridge North, TX 77385

Creative Floor Solutions
380 Larch Avenue
Bogota, NJ 07603

Cusack Custom Wood Floori
177 Whippoorwill Road
Yorktown Heights, NY 10598

DeLage Landen Financial
111 Old Eagle School Road
Wayne, PA 19087

Digitech Printers
150 West 30th Street
#2
New York, NY 10001

Empire State Electrical
430 3rd Avenue
Brooklyn, NY 11215

Ennish Construction
147 W. 35th Street
New York, NY 10001

Enobrac Plumbing Inc
508 Morgan Avenue
Brooklyn, NY 11222

Feldman Lumber
1281 Metropolitan Avenue
Brooklyn, NY 11237

Fidel Luiz Pastrana
c/o Restivo & Murphy LLP
401 Franklin Avenue
Suite 107
Garden City, NY 11530

G-Tech Elevator
12 Sherman Street
Linden, NJ 07036

Geoffrey A Lagas & Associ
45 Rockerfeller Plaza
New York, NY 10111

Geoland
1317 Park Avenue
New Hyde Park, NY 11040

GMC Contracting
226 Miller Street
Newark, NJ 07114

Gotham General Carpentry
933 Bruckner Boulevard
Bronx, NY 10459

Grato Parquet
104 Reade Street
New York, NY 10013

Hamilton Metalcraft
59 New York Avenue
Westbury, NY 11590

Henry Restoration
120 Lake Avenue South
Suite 14
Nesconset, NY 11767

High Rise Fire Protection
144 21st Street
Brooklyn, NY 11232

Illuminico
1185 6th Avenue
Floor 3
New York, NY 10036

Infinity Painting Inc.
1978 Richmond Terrace
Suite 5
Staten Island, NY 10302

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

IRS
290 Broadway
New York, NY 10007

Jersey Granite & Tile LLC
234 Boundary Road
#4
Marlboro, NJ 07746

JLM
11 John Street
New York, NY 10038

JP McHale Pest
241 Bleakley Avenue
Buchanan, NY 10511

JPMorgan Chase Bank
82 Seventh Street
Garden City, NY 11530

Kilroy Architectural
425 Austin Place
Bronx, NY 10455

KM Associates of NY Inc
158 West 29th Street
7th Floor
New York, NY 10001

KNS Buildling Restoration
59-29 55th Street
Flushing, NY 11378

L. Martone & Sons Inc
166 Sea Cliff Avenue
Glen Cove, NY 11542

L.I.F. Security
5 Harbor Park Drive
Port Washington, NY 11050

Lake Landscape and Mason
339 Ronkonkoma Avenue
Ronkonkoma, NY 11779

LCD Elevator Repair Inc
690 Broadway
Massapequa, NY 11758

Lion Electric Inc
205 Route 46 West
Suite 7B
Totowa, NJ 07512

LL Overhead Garage Doors
31-25 45th Street
Astoria, NY 11103

Loading Dock, Inc.
20 Meta Lane
Lodi, NJ 07644

Maspeth Welding
59-30 54th Street
Maspeth, NY 11378

Maspeth Welding Inc.
59-30 54th Street
Maspeth, NY 11378

Medley Air Inc.
265 McCormick Drive
Bohemia, NY 11716

Meltzer Lippe
190 Willis Avenue
Mineola, NY 11501

Mercon Contracting Inc
1616 Mermaid Avenue
Brooklyn, NY 11224

Metropolis Group Inc
22 Cortlandt Street
#10
New York, NY 10007

Metropolitan Lumber & Har
617 11th Avenue
New York, NY 10036

Michael Prophete
c/o The Hamel Law Firm
11 E. 44th Street
Suite 1201
New York, NY 10017

Mode Unlimited
1133 McDonald Avenue
Brooklyn, NY 11230

Nithun Construction Compa
475 McDonald Avenue
Suite 300A
Brooklyn, NY 11218

NYC DOB
280 Broadway
New York, NY 10007

NYC DOT
55 Water Street
New York, NY 10041

Oxford United Health
136-02 Roosevelt Avenue
Flushing, NY 11354

Pasenti Concrete
1407 Kings Highway
#219
Sugar Loaf, NY 10981

Patriot Sawcutting Inc
103 South Van Brunt Stree
Englewood, NJ 07631

Pella Windows & Doors
345 Walsh Drive
Parsippany, NJ 07054

Pillinger Miller Tarallo
17 State Street
F7
New York, NY 10004

Plan B Engineering LLC
475 Veit Road
Huntingdon Valley, PA 19006

Priority NY Inc
1428 Midland Avenue
Suite 2 & 3
Bronxville, NY 10708

Prudential Financial
1270 6th Avenue
New York, NY 10020

PS Industries Incorporate
1150 48th Street South
Grand Forks, ND 58201

Queens County Carting Inc
35-12 19th Avenue
Suite 3W
Astoria, NY 11105

ReadyRefresh
P.O. Box 856192
Louisville, KY 40285

Regulator Construction Co
41 Torre Place
Yonkers, NY 10703

ReqPay Inc
287 Park Avenue South
Suite 430
New York, NY 10010

RFA Hudson Inc.
350 National Blvd.
Suite 2B
Long Beach, NY 11561

Richard Aguggia
67 Kirkwood Street
Long Beach, NY 11561

Rizzo Associates Inc
97 East Hawthorne Avenue
Valley Stream, NY 11580

RJS Pest
286 Madison Avenue
#502
New York, NY 10017

Rock Group
53-28 11th Street
Long Island City, NY 11101

Roof Services
48 West Jefryn Boulevard
Deer Park, NY 11729

RPO Inc
146 West 29th Street
New York, NY 10001

Saltus LLC
139 Fulton St
#804
New York, NY 10038

SBA
26 Federal Plaza
#1300
New York, NY 10278

Securities & Exchange
Northeast Regional Office
Woolworth Building
233 Broadway
New York, NY 10279

Select Interiors
580 5th Avenue
New York, NY 10036

Signature Cleaning Srvcs
231 West 29th Street
New York, NY 10001

Site Safety LLC
29 West 38th Street
12th Floor
New York, NY 10018

Spring Scaffolding
49-30 31st Place
Long Island City, NY 11101

Star Dash Mechanical
71 McArthur Avenue
Staten Island, NY 10312

Stone Source
215 Park Avenue South
New York, NY 10003

The Marin Organization
998 Old Country Road #401
Plainview, NY 11803

The United States Trustee
Long Island
Federal Plaza Courthouse
560 Federal Plaza
Central Islip, NY 11722

Tishman Speyer Properties
45 Rockerfeller Plaza
New York, NY 10111

Trinity Highway Products
1170 North State Street
Girard, OH 44420

TSC Training Academy
36-06 43rd Avenue
Long Island City, NY 11101

UnoClean
150 Arrowhead Drive
Hampshire, IL 60140

Verizon
299 Broadway
New York, NY 10007

Vespa Stone
241 West 30th Street
New York, NY 10001

Vonage NYC
140 Broadway
New York, NY 10006

Yenni Placencia DeJesus
c/o Gorayeb & Associates
100 William Street
Suite 1900
New York, NY 10038

Zetlin & DeChiara LLP
801 2nd Avenue
16th Floor
New York, NY 10017

**United States Bankruptcy Court
Eastern District of New York**

In re **RFA Frontino LLC**

Debtor(s)

Case No.
Chapter**11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **RFA Frontino LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

December 23, 2020

Date

/s/ Scott A. Steinberg, Esq.**Scott A. Steinberg, Esq. 1838218**

Signature of Attorney or Litigant

Counsel for **RFA Frontino LLC****Meltzer, Lippe, Goldstein & Breitstone, LLP****190 Willis Avenue****Mineola, NY 11501****516-747-0300 Fax: 516-747-0653****ssteinberg@meltzerlippe.com**

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

**STATEMENT PURSUANT TO LOCAL
BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S): RFA Frontino LLC

CASE NO.: _____

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (*or any other petitioner*) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

☒ NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.

☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:

1. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

2. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

CURRENT STATUS OF RELATED CASE: _____
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

3. CASE NO.: _____ JUDGE: _____ DISTRICT/DIVISION: _____

CASE STILL PENDING (Y/N): _____ [If closed] Date of closing: _____

(OVER)

DISCLOSURE OF RELATED CASES (cont'd)

CURRENT STATUS OF RELATED CASE: _____

(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): _____

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: _____

NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:

I am admitted to practice in the Eastern District of New York (Y/N): Y

CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

/s/ Scott A. Steinberg, Esq.**Scott A. Steinberg, Esq. 1838218**

Signature of Debtor's Attorney

Meltzer, Lippe, Goldstein & Breitstone, LLP**190 Willis Avenue****Mineola, NY 11501****516-747-0300 Fax:516-747-0653**_____
Signature of Pro Se Debtor/Petitioner_____
Signature of Pro Se Joint Debtor/Petitioner_____
Mailing Address of Debtor/Petitioner_____
City, State, Zip Code_____
Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

**United States Bankruptcy Court
Eastern District of New York**

In re **RFA Frontino LLC**

Debtor(s)

Case No.
Chapter**11**

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, **Anthony Frontino**, declare under penalty of perjury that I am the **Vice President** of **RFA Frontino LLC**, and that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said corporation at a special meeting duly called and held on the **23** day of **December**, 2020.

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Anthony Frontino, Vice President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Anthony Frontino, Vice President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Anthony Frontino, Vice President** of this Corporation is authorized and directed to employ **Scott A. Steinberg, Esq. 1838218**, attorney and the law firm of **Meltzer, Lippe, Goldstein & Breitstone, LLP** to represent the corporation in such bankruptcy case."

Date 12/23/2020Signed /s/ Anthony Frontino
Anthony Frontino

Resolution of Board of Directors
of
RFA Frontino LLC

Whereas, it is in the best interest of this corporation to file a voluntary petition in the the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Anthony Frontino, Vice President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Anthony Frontino, Vice President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Anthony Frontino, Vice President** of this Corporation is authorized and directed to employ **Scott A. Steinberg, Esq. 1838218**, attorney and the law firm of **Meltzer, Lippe, Goldstein & Breitstone, LLP** to represent the corporation in such bankruptcy case.

Date 12/23/2020

Signed /s/ Anthony Frontino
Anthony Frontino

Date 12/23/2020

Signed /s/ Richard Aguggia
Richard Aguggia